



AUTHORISATION LETTER

AUTHORISATION LETTER

We hereby authorise that **Edge Risk Partners (Pty) Ltd** may have access to all of our policy information.

Policy Number _____ Entity Name _____

Policy Number _____ Entity Name _____

Policy Number _____ Entity Name _____

Policy Number _____ Entity Name _____

Policy Number _____ Entity Name _____

Signed at _____ this _____ day of _____ 20____

Company Name

Signature

Name

Designation